

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	354	4-18-94
TYPIST	330	6/15
VERIFIER	258	6/15
CORPS CORR.		
SPEC. HAND	431	6-10-94
FILE MAINT.		4-19-94
DRAFTING		

# INDEX OF CLAIMS

Claim	Final	Original	Date
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SYMBOLS  
✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) Canceled  
+ ..... Restricted  
N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Final	Original	Date
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